2022 Annual Benefits

Open Enrollment

Donna Brewer, Director of Employee Benefits
Topics

• Benefit Survey Results
• What’s changing effective January 1, 2022
• Medical Plans - Plan Features Continuing In 2022
• Health Savings Account (HSA)
• Flexible Spending Account (FSA)
• Dental Plan
• Vision Plan
• Supplemental Life Insurance
• Disability Programs and the CT Paid Leave Benefit
• Wellness Program
• Next Steps!
Benefit Survey Background

Purpose of the Survey

• Provide new Human Resources Leadership with baseline of employee satisfaction with Wesleyan benefits
• Gain insight into any barriers based on race, socioeconomic status, gender, length of service, and age
• Gain insight into employee awareness of benefits programs and interest in additional voluntary employee-paid benefits
• Help inform future planning to ensure competitive benefit programs

Spring - 2021: offered survey to 966 benefits eligible faculty and staff
Response Rate: approximately 66% (69% staff, 62% faculty)
Summary of Benefit Survey Findings

- Benefits with the highest level of satisfaction:
  - Dependent Tuition
  - Sick Leave
  - Vacation Time
  - Retirement Plan – Employer Contribution

- Lowest levels of satisfaction:
  - The EAP
  - Long-Term Disability
  - EAP Customer Service
  - Neighborhood Preschool Scholarships
Summary of Benefit Survey Findings

- Barriers and inequalities - 5% reported the following:
  - Costs are a barrier and inequity for lower wage earners.
  - Fertility and infertility treatment for heterosexual versus same-sex couples
  - Insurance costs for those in domestic partnerships versus married couples

- Perception - faculty members are treated more favorably than staff.

- Good participation in wellness programs by staff.
Importance of Additional Care & Voluntary Employee Paid Options

- Half of all covered employees viewed access to the following options as being moderately or very important:
  - Nutritionist 56%
  - Chiropractic 54%
  - Integrative medicine 54%

- Interest in voluntary benefits paid 100% by employees varied
  - Auto/Homeowners Insurance 49%
  - Legal Assistance 35%
  - Pet Insurance 33%
  - Identity Theft Insurance 29%
Next Steps

Multi-year plan that considers trends and employee feedback

Focus Areas:

• The best coverage at a reasonable cost
• Benefits administration process improvement
• Vendor customer service
• Continued assessment of programs with lower satisfaction
What’s Changing Effective January 1, 2022

• Premiums
  • Medical, Dental & Vision - No change to premium amounts
  • Medical Premium Subsidy - Unchanged, however, salary threshold increasing to $65,396

• Eligibility
  • Non-Temporary Part-Time Staff (.5 FTE) - Are now eligible for medical, dental, vision, flexible spending accounts, life and disability coverage, as well as the Wellness Points program

• Cigna
  • Access to One Guide representatives and technology to assist you with coverage and claims questions. Representatives will help you find providers and connect you to lifestyle management coaches, clinical and behavioral health programs.
  • Certain continuous glucose monitor supplies are now covered in full in-network.
  • Medically necessary nutrition visits increase from 3 visits to 12 visits a year.
What’s Changing Effective January 1, 2022

• Delta Dental
  • You or your covered dependents can roll over 25% of unused 2021 dental balances to 2022 (must meet certain qualifications).

• Connecticut Paid Leave Program (CT PL)
  • Benefits begin January 1, 2022. Wesleyan-provided short-term disability and parental leave benefits will supplement the State’s benefits to provide our current benefit level.

• Retirement Plan Loans
  • Loans will now be available through Fidelity starting December 1, 2021.
  • TIAA is changing the way they provide loans.
  • TIAA and Fidelity will be sending communications to participants regarding these changes.
Medical Plans
### 2022 Monthly Medical Employee Premiums

<table>
<thead>
<tr>
<th>Tier</th>
<th>OAPIN</th>
<th>OAP</th>
<th>HDHP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>$244.36</td>
<td>$288.79</td>
<td>$182.52</td>
</tr>
<tr>
<td>Employee + Child(ren)</td>
<td>$465.40</td>
<td>$549.52</td>
<td>$347.41</td>
</tr>
<tr>
<td>Employee + Spouse/Domestic Partner</td>
<td>$589.95</td>
<td>$696.40</td>
<td>$440.64</td>
</tr>
<tr>
<td>Family Including Spouse/Domestic Partner</td>
<td>$734.10</td>
<td>$866.61</td>
<td>$548.32</td>
</tr>
</tbody>
</table>

2022 Premium Subsidy Eligibility: Employees whose annualized full-time base salary is less than or equal to $65,396. Subsidy credits are applied to the employee paycheck based on pay frequency.

<table>
<thead>
<tr>
<th>Tier</th>
<th>Monthly Subsidy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>$67.88</td>
</tr>
<tr>
<td>Employee + Child(ren)</td>
<td>$146.11</td>
</tr>
<tr>
<td>Employee + Spouse/Domestic Partner</td>
<td></td>
</tr>
<tr>
<td>Family Including Spouse/Domestic Partner</td>
<td>$180.09</td>
</tr>
</tbody>
</table>
Medical Plans

- Wesleyan offers 3 health plans through Cigna
  - Open Access Plan - OAP
  - Open Access In-Network Plan - OAPIN
  - High-Deductible Health Plan with an HSA option - HDHP
    - Employee choice
    - Tax preferred opportunity to save for future healthcare needs
    - More employee control over health care expenditures
    - Portability

- Telemedicine
  - Behavioral health options continue to be available.

- Dependents are covered up to age 26, coverage terminates at the end of the month following 26th birthday.
# Wesleyan Medical Plan Design Review

<table>
<thead>
<tr>
<th></th>
<th>OAPIN</th>
<th>OAP</th>
<th>HDHP</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Deductible Format</strong></td>
<td>Individual</td>
<td>Individual</td>
<td>Family</td>
</tr>
<tr>
<td><strong>In-Network Deductible</strong></td>
<td>$500 / $1,000</td>
<td>$500 / $1,000</td>
<td>$1,500 / $3,000</td>
</tr>
<tr>
<td><strong>Out-Of-Pocket Maximum</strong></td>
<td>$1,500 / $3,000</td>
<td>$1,500 / $3,000</td>
<td>$3,000 / $6,000</td>
</tr>
<tr>
<td><strong>Matching HSA Contribution (100% match up to the limits shown)</strong></td>
<td>N/A</td>
<td>N/A</td>
<td>$500</td>
</tr>
<tr>
<td><strong>Coinsurance (In-Network/Out-of-Network)</strong></td>
<td>100%</td>
<td>100% / 70%</td>
<td>100% / 80%</td>
</tr>
<tr>
<td><strong>Office/Specialist/Urgent Care Copays</strong></td>
<td>$25 / $35 / $40</td>
<td>$25 / $35 / $40</td>
<td>Deductible</td>
</tr>
<tr>
<td><strong>Inpatient</strong></td>
<td>Deductible</td>
<td>Deductible</td>
<td>Deductible</td>
</tr>
<tr>
<td><strong>Outpatient</strong></td>
<td>Deductible</td>
<td>Deductible</td>
<td>Deductible</td>
</tr>
<tr>
<td><strong>Emergency Room</strong></td>
<td>$200</td>
<td>$200</td>
<td>Deductible</td>
</tr>
<tr>
<td><strong>Preventive Care</strong></td>
<td>Healthcare Reform Schedule</td>
<td>Healthcare Reform Schedule</td>
<td>Healthcare Reform Schedule</td>
</tr>
</tbody>
</table>
Wesleyan Pharmacy Plan Design Review

<table>
<thead>
<tr>
<th></th>
<th>OAPIN</th>
<th>OAP</th>
<th>HDHP (after deductible has been meet)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Retail limited to</strong></td>
<td><strong>OAP</strong></td>
<td><strong>OAP</strong></td>
<td><strong>HDHP</strong></td>
</tr>
<tr>
<td>30-day supply</td>
<td>20% - min. $ 5, max. $50</td>
<td>25% - min. $15, max. $50</td>
<td>25% - min. $20, max. $50</td>
</tr>
<tr>
<td>Home Delivery</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>up to 90-day supply</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>including specialty</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>drugs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-authorization</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>for specialty drugs</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Retail 30-day:

- **Generic:**
  - 20% - min. $5, max. $50
- **Preferred Brand:**
  - 25% - min. $15, max. $50
- **Non-Preferred Brand:**
  - 25% - min. $20, max. $50

### Retail & Home Delivery 90-day:

- **Generic:**
  - 20% - min. $10, max. $100
- **Preferred Brand:**
  - 25% - min. $30, max. $100
- **Non-Preferred Brand:**
  - 25% - min. $40, max. $100
Cigna One Guide

Contact a representative by calling the customer service number on the back of your Cigna insurance card or by going to myCigna.com.

- Answer coverage questions
- Keep on track with preventive visits
- Find the right health care providers in-network
- Connect to lifestyle management programs, clinical and behavioral health programs
- Get cost estimates and avoid surprise expenses
- Understand Explanation of Benefits (EOB) and medical bills
Programs to Support Emotional Health

- Cigna Total Behavioral Health Program*
  - Dedicated support, lifestyle coaching and online tools to help you manage life events
- Virtual Behavioral Care*
- Ginger*
  - Behavioral health coaching via text, self-guided content and if needed, video-based therapy and psychiatry
- TalkSpace*
  - Online therapy services via private messaging or live video with a dedicated, licensed therapist
- IPrevail
  - Free on-demand peer coaching, available 24/7, that includes interactive lessons and tools, support communities focused on helping to alleviate stress, anxiety, depression and more
- Happify
  - A free app with science-based games and activities designed to help you gain confidence, reduce stress and anxiety, increase mindfulness and emotional well-being and boost health and performance
- CignaResilience.com
  - A free resource to help you understand and learn more about resilience, take an online questionnaire to assess your resilience and learn about tools to build it

*Cost sharing applies.
What is a High-Deductible Health Plan (HDHP)?

• A medical and prescription plan with an up-front deductible applicable to all eligible medical and pharmacy expenses except for preventive care

• Can be combined with a Health Savings Account (HSA) if you meet the eligibility requirements

• Focused HDHP/HSA presentation to be posted on the 2022 Open Enrollment Benefits website
Health Savings Account (HSA)
Health Savings Account (HSA)

• An HSA is an individually owned bank account that allows you to set aside pre-tax dollars to pay for qualified out of pocket expenses.
• The employer and employee can make tax-free deposits into an HSA.
• Any unused funds roll over year to year.
• You decide how and when to use the money available in the account.

• HSAs can be used to cover:
  • Insurance deductibles, copays and coinsurance
  • Qualified health care expenses (including dental & vision)

• 2022 HSA contribution limit is a flat dollar amount
  • $3,650 for Individual
  • $7,300 for Family

• Wesleyan matches employee contributions up to $500 annually, this is accounted in the contribution limit noted above.

• Those age 55 or over can contribute an additional $1,000 annually.

• Please view our [HDHP Medical Plan and HSA presentation](#) for important plan details.
Flexible Savings Account (FSA)
Flexible Spending Accounts

Group Dynamic Inc. (GDI) - Plan Administrator

Medical Expense Reimbursement Account (MERA)

This plan allows you to pay for eligible out-of-pocket expenses with pre-tax dollars. Eligible expenses include plan deductibles, copays, coinsurance, and other non-covered medical, dental and vision healthcare expenses for you and your dependents.

The 2022 maximum annual MERA limit is $2,750 (IRS may update the contribution limit)

Dependent Care Account

This plan allows you to pay for eligible out-of-pocket dependent care expenses with pre-tax dollars. Eligible expenses may include daycare center, in-home childcare, and before or after-school care for your dependent children under age 13 (other individuals may qualify if they are incapable of self-care and are considered your taxable dependents).

The 2022 maximum annual Dependent Care limit is $5,000 ($2,500 if married and filing separately).

Claims run out grace period - 2022 claims incurred through 3/15/23 must be submitted to GDI for reimbursement by 4/15/23. If you have a 2021 balance, you must submit them to GDI by 04/15/2023 for 2021 claims (or used for 2022 claims incurred through 12/31/22).
# HSA vs FSA

<table>
<thead>
<tr>
<th></th>
<th>Health Savings Account (HSA)</th>
<th>Flexible Spending Account (FSA)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical Plan Design</td>
<td>Must meet federal design mandates</td>
<td>No plan design requirements</td>
</tr>
<tr>
<td>2021 Contribution Limits</td>
<td>Employee + employer contribution limits of $3,650 single and $7,300 family, plus $1,000 employee catch-up contribution if age 55+</td>
<td>Set by employer, but no more than $2,750 (IRS may update the contribution limit)</td>
</tr>
<tr>
<td>Source of Contributions</td>
<td>Employee and/or Employer</td>
<td>Employee</td>
</tr>
<tr>
<td>Employer Contribution</td>
<td>Up to $500 of employee contribution matched</td>
<td>None</td>
</tr>
<tr>
<td>Ability to Change Payroll</td>
<td>Unrestricted; limit to monthly changes</td>
<td>Annual election; change allowed with Qualified Life Event only</td>
</tr>
<tr>
<td>Deductions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year End Account Balance</td>
<td>Contributions &amp; earnings carryover</td>
<td>Use or Lose</td>
</tr>
<tr>
<td>Portability of Account</td>
<td>Yes</td>
<td>None</td>
</tr>
<tr>
<td>Investment of Contributions</td>
<td>Available after HSA balance reaches $1,000</td>
<td>NA</td>
</tr>
<tr>
<td>Tax-Free Reimbursement or</td>
<td>Qualified health expenses. Also allows payment of premiums for COBRA and Medicare</td>
<td>Qualified health expenses. Payment of premiums not allowed</td>
</tr>
<tr>
<td>Distributions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Taxable Distributions</td>
<td>If reimbursed for other than qualified healthcare expense prior to age 65</td>
<td>NA</td>
</tr>
</tbody>
</table>
Dental Plan
## 2022 Monthly Dental Employee Premiums

<table>
<thead>
<tr>
<th>Tier</th>
<th>Delta Dental Core Plan</th>
<th>Delta Dental Buy-Up Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>$14.73</td>
<td>$20.33</td>
</tr>
<tr>
<td>Employee + Child(ren)</td>
<td>$27.98</td>
<td>$38.62</td>
</tr>
<tr>
<td>Employee + Spouse/Domestic Partner</td>
<td>$35.34</td>
<td>$48.78</td>
</tr>
<tr>
<td>Family Including Spouse/Domestic Partner</td>
<td>$44.21</td>
<td>$61.03</td>
</tr>
</tbody>
</table>
Delta Dental

Carryover Maximum – Allows you to carryover 25% of unused benefits into subsequent plan years! Preventive care does not count towards maximum.

Requirements:

• You must enroll for the entire plan year.
• Use no more than 50% of the standard annual maximum during the benefit year.
• See a dentist during the benefit year for an exam or cleaning. (claim must be submitted). If preventive care is not received, ALL accumulated carryover maximum benefit is lost.
## Delta Dental - Carryover Benefit

<table>
<thead>
<tr>
<th>Benefit Year</th>
<th>Standard Annual Maximum</th>
<th>Claims Used During Year (if less than &lt;$600/year, qualify for rollover limit)</th>
<th>Annual Benefit Remaining</th>
<th>Carryover Benefit - 25% of Annual Benefit Remaining ($300 maximum)</th>
<th>Total Benefit Maximum for Plan Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2021</td>
<td>$1,200</td>
<td>Cleaning/Exam + $80 Other Services</td>
<td>$1,120</td>
<td>$1,120 X 25% = $280</td>
<td>$1,200</td>
</tr>
<tr>
<td>2022</td>
<td>$1,200</td>
<td>Cleaning/Exam + $380 Other Services</td>
<td>$820</td>
<td>$820 X 25% = $205</td>
<td>$1,200 + $280 = $1,480</td>
</tr>
<tr>
<td>2023</td>
<td>$1,200</td>
<td>No Cleaning or Exam + $0 Other Services</td>
<td>$1,200</td>
<td>$0 Carries forward to 2024 and all extra carryover is lost</td>
<td>$1,480 + $205 = $1,685</td>
</tr>
<tr>
<td>2024</td>
<td>$1,200</td>
<td>...</td>
<td>...</td>
<td>...</td>
<td>$1,200</td>
</tr>
</tbody>
</table>
## Delta Dental Plan

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Deductible</td>
<td>Individual $50</td>
<td>Individual $50</td>
</tr>
<tr>
<td></td>
<td>Family $150</td>
<td>Family $150</td>
</tr>
<tr>
<td>Preventive Care</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td></td>
<td>(No deductible &amp; <strong>not included</strong> in annual allowance)</td>
<td>(No deductible &amp; <strong>not included</strong> in annual allowance)</td>
</tr>
<tr>
<td>Basic Services</td>
<td>80%</td>
<td>80%</td>
</tr>
<tr>
<td>Major Services</td>
<td>50%</td>
<td>60%</td>
</tr>
<tr>
<td>Annual Maximum Benefit</td>
<td>$1,200</td>
<td>$2,000</td>
</tr>
<tr>
<td>Orthodontia</td>
<td>50%</td>
<td>50%</td>
</tr>
<tr>
<td>Orthodontia Lifetime Maximum</td>
<td>$1,500</td>
<td>$2,000</td>
</tr>
<tr>
<td></td>
<td>(Adults &amp; Dependent Children)</td>
<td>(Adults &amp; Dependent Children)</td>
</tr>
<tr>
<td>Dependent Coverage</td>
<td>Dependents will be covered up to age 26</td>
<td>(coverage will terminate at the end of the month following 26th birthday)</td>
</tr>
</tbody>
</table>
Vision Plan
## 2022 Monthly Vision Employee Premiums

<table>
<thead>
<tr>
<th>Tier</th>
<th>EyeMed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employee</td>
<td>$4.71</td>
</tr>
<tr>
<td>Employee + Children</td>
<td>$9.42</td>
</tr>
<tr>
<td>Employee + Spouse</td>
<td>$8.95</td>
</tr>
<tr>
<td>Family</td>
<td>$13.85</td>
</tr>
</tbody>
</table>
EyeMed

- Through EyeMed
- No change in premiums
- Hardware only - lenses/frames/contact lenses
- Eye exams are covered under the Cigna medical plans.
- Vision plan is 100% employee funded.
## EyeMed Plan

<table>
<thead>
<tr>
<th>Plan Features</th>
<th>EyeMed</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Frames</strong></td>
<td>$0 copay, $150 allowance: 20% off balance over $150</td>
</tr>
<tr>
<td><strong>Standard Corrective Lenses</strong></td>
<td></td>
</tr>
<tr>
<td>• Single Vision</td>
<td>$20</td>
</tr>
<tr>
<td>• Bifocal</td>
<td>$20</td>
</tr>
<tr>
<td>• Trifocal</td>
<td>$20</td>
</tr>
<tr>
<td><strong>Premium Lenses</strong></td>
<td></td>
</tr>
<tr>
<td>• Stand Progressive</td>
<td>$85</td>
</tr>
<tr>
<td>• Premium Progressive</td>
<td>80% of charge less $35 allowance</td>
</tr>
<tr>
<td><strong>Contact Lenses</strong></td>
<td></td>
</tr>
<tr>
<td>• Medically Necessary</td>
<td>$0 copay, $150 allowance: 15% off balance over $150</td>
</tr>
<tr>
<td>• Elective</td>
<td>$150 allowance: 15% off balance over $150</td>
</tr>
<tr>
<td><strong>Frequency</strong></td>
<td></td>
</tr>
<tr>
<td>• Frames</td>
<td>Once every 24 months</td>
</tr>
<tr>
<td>• Standard Plastic Lenses or Contacts</td>
<td>Once every 12 months</td>
</tr>
</tbody>
</table>
Supplemental Life Insurance
Unum Supplemental Life Insurance Plans

Unum administers our supplemental life insurance plans:

- **Supplemental Employee Life:** Can be purchased up to 5 times annual salary not to exceed $750,000.
- **Supplemental Spouse Life:** Can be purchased up to $100,000.
- **Supplemental Child Life:** $5,000
- **Evidence of Insurability (EOI) application** is required and must be approved by Unum.
Connecticut Paid Leave Program (CT PL)
Connecticut Paid Leave

As a covered employee in the State of Connecticut, the Connecticut Paid Leave (CT PL) program allows you to take time off to care for yourself and your family’s health needs without worrying about lost of income while you are away from work.

Effective Date:

• January 1, 2022

Eligibility:

• Must be an active employee, have either earned wages of at least $2,325 over the qualifying period or have been employed within the last twelve months.

Benefit:

• Twelve weeks if you or a family member have experienced a serious health condition, are welcoming a new child into your family, are impacted by family violence, need to care of a family member injured while on active duty in the military or to take leave to prepare for a family member entering the active military overseas.
• Two additional weeks are available if you experience a serious health condition during pregnancy.
# Connecticut Paid Leave

## Weekly Benefit:

<table>
<thead>
<tr>
<th>Annual Earnings</th>
<th>Wesleyan Total Weekly Short Term Disability Benefit</th>
<th>State Benefit (Paid by State of Connecticut through AFLAC (01/01/2022))</th>
<th>Wesleyan Benefit (Paid by Wesleyan)</th>
</tr>
</thead>
<tbody>
<tr>
<td>$30,000</td>
<td>$576.92</td>
<td>95% of average weekly wage = $548.08 up to 12 weeks</td>
<td>$28.84</td>
</tr>
<tr>
<td>$50,000</td>
<td>$961.54</td>
<td>81% of average weekly wage = $780.00 (capped at maximum) up to 12 weeks</td>
<td>$181.54</td>
</tr>
<tr>
<td>$100,000</td>
<td>$1,923.08</td>
<td>41% of average weekly wage = $780.00 (capped at maximum) up to 12 weeks</td>
<td>$1,143.08</td>
</tr>
</tbody>
</table>

**Filing a Claim:**  [www.ctpaidleave.org](http://www.ctpaidleave.org)

- **File for State benefits with AFLAC** - thirty (30) days in advance whenever possible to ensure timely payment. Payments are approved within five days of all documentation being received by State and payments are paid two weeks in arrears.
- Employer verification is required - employee is required to provide form to employer. Delay in getting this to Wesleyan Human Resources will delay payment.
- Medical documentation is required to be submitted to the state and to Unum.
- **File for Wesleyan supplemental benefits** by contacting benefits@wesleyan.edu.
Wellness Incentive Points Program

Wesleyan’s Wellness Incentive Points Program rewards individuals dedicated to improving their health and well-being. You can earn points by actively participating in health improvement programs and activities that can then be redeemed for cash payments. Benefit eligible faculty, staff, spouses and partners are eligible to participate and earn points (up to $150/each on a semi-annual basis).

Wellness points are entered through the Wellness Points Tool which is available under “My Information” in WesPortal.

**Note:** To add or change a spouse/domestic partner, please click the Spouse/Partner link at the top of the screen.

Cardinal Fit Program & Lunch-N-Learns
Next Steps!

See the 2022 Benefits Guide for more details and instructions on how to access all Cigna programs.

myCigna.com and Cigna customer service group at 800-Cigna24 are also great resources!
Open Enrollment for Coverage Effective January 1, 2022

Be Informed...

• View your benefit options through WesPortal under Open Enroll 2022, “My Information”.
• Enter the 2022 Open Enroll panel, view and accept the Confirmation page.
• You will then be directed to a page titled “Benefit Elections as of 1/1/2022”.
• From this page, you will be able to click each of the benefit areas to enroll or change your enrollment.

_Important Note:_ If you do not elect to make benefit changes, your 2021 elections will roll over to 2022. However, you **must re-enroll in the MERA, Dependent Care and HSA plans.**

Take Action...

The Open Enrollment period will begin on November 1, 2021, and end on November 15, 2021, at midnight.

_Note:_ You must click the **“SAVE”** button on each page you are making a change or an election for them to be saved and displayed on the summary page.
Questions?

Questions on your 2022 benefits or the enrollment process?

- View the Open Enrollment materials - Human Resources Webpage at [2022 Open Enrollment](#).
- Virtual HSA Presentation - November 3, 2021, 12 pm - 1 pm
- Virtual Open Enrollment Presentation - Human Resources Webpage at [2022 Open Enrollment](#)
- Virtual Benefits Fair - November 3, 2021, from 10 am - 2 pm
  - Presentations and Q&As
  - See your open enrollment e-mail for times and Zoom Links.
Questions?

Questions on your 2022 benefits or the enrollment process?

• Send an email to benefits@wesleyan.edu.
• Virtual 1:1 Appointment with Benefits Team - A Microsoft Teams link will be sent when you book your appointment.
  o November 4, 2021 - Link to Bookings to schedule 30-minute slot.
  o November 10, 2021 - Link to Bookings to schedule 30-minute slot.
  o November 15, 2021 - Link to Bookings to schedule 30-minute slot.